

New Jersey Department of Environmental Protection
Pesticide Control Program - MC401-04A
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Telephone: (609) 984-6901

APPLICATION FOR INITIAL REGISTRATION OF A PESTICIDE PRODUCT -- PAGE 2

INSTRUCTIONS: Complete this form **only** if "**Yes**" was checked on Form VPX-014A in the column to the right of the EPA Registration Number of a listed product. Complete one of these forms for **each** product checked "**Yes**".

- 1) EPA Registration Number of Product _____
- 2) How would you describe your company with regard to the active ingredient(s) found in this product? Check all that apply.

☐ Primary Registrant

☐ Product Formulator/Reformulator

☐ Product Distributor
- 3) Has the US EPA placed "conditions" on the registration of this product, and/or the active ingredient(s) contained in this product?

☐ Yes ➔ Complete Question #4 ☐ No ➔ Go to #5
- 4) Check off all that apply in regard to the "conditions" of registration:

☐ Potential ground and/or surface water concerns

☐ Potential cancer, reproductive or other health effect concerns

☐ Potential adverse environmental/ecological impacts

☐ Data gaps (list) _____

☐ Other (list) _____

- 5) Please attach copies of the following documents related to this product:
 - a) Material Safety Data Sheet (MSDS)
 - b) US EPA Notice of Pesticide Registration/Reregistration, or
US EPA Notice of Supplemental Distribution
 - c) US EPA Fact Sheet for the Active Ingredient(s)